PLEASE TYPE OR PRINT		Entered previous May Show	
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☐ Ms.			
Mr. Artist	MOORE		
Permanent Address 1141			(Last Name Last)
8,4410 6 Street	et Tel. ( )		40 X467
Zip			
Temporary or Studio Address			
	reet		City
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Zip	Area Code		
Western Reserve, Collaborator		nty were you l	
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If May Show entri			
Artist will pic			
Museum shou			
Museum shou to this addr		ist at artist's e.	xpense
A 1 ( )	h A	1000	
Special Instruction		1 1	
When necessary in	clude below	instructions o	r a drawing of
how the object is	to be assemb	led and display	yed.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects, it is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until July 1, 1984.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature ( ) Love IVI Box

DO NOT DETAC